## PART B - FEE(S) TRANSMITTAL

Complete and send this for an Sog

ther with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

|                  |   | TRADEMA  | or ]   | <u>Fax</u> (70                             | 3) 746-4000   |  |  |
|------------------|---|--|--|--|---|--|--|
|                  | INSTRUCTIONS: This fo<br>appropriate. All further co-<br>indicated unless corrected<br>maintenance fee notification | rm should be used for tran<br>rrespondence including the l<br>below or directed otherwise<br>ns. | smitting the ISSUE FEE and<br>Patent, advance orders and noti<br>in Block I, by (a) specifying | PUBLICATI<br>fication of m<br>a new corres | ON FEE (if requiaintenance fees voordence address;  | ired). Blocks 1 through 5 s<br>vill be mailed to the current<br>and/or (b) indicating a sepa   | hould be completed where<br>correspondence address as<br>arate "FEE ADDRESS" for                               |
| 01 FC:<br>02 FC: | 27305 7 HOWARD & HOWARD & HOWARD & HOWARD & HOWARD WOODWA BLOOMFIELD H 72005 HTECKLU2 000000                        | 1000, 1411 40204-2121  | O NOS  | I her State addr trans                     | ers. Each additional its own certificate (SOO   U.S. Certeby certify that the service vessed to the Mai | al paper, such as an assignme of mailing or transmission.  "tificate of Mailing or Transits Fee(s) Transmittal is bein with sufficient postage for fit I Stop ISSUE FEE address TO (703) 746-4000, on the company of the supplemental supplemen | smission (Cx press<br>g deposited with the United<br>st class mail in an envelope<br>above, or being facsimile |
|                  | APPLICATION NO.   | FILING DATE  | FIRST NAME   | FIRST NAMED INVENTOR                       |   | ATTORNEY DOCKET NO.  | CONFIRMATION NO.   |
|                  | 09/966,468  | Toshiaki   | Toshiaki Shimizu   |  | 60,518-004  | 6484   |  |
|                  | TITLE OF INVENTION: G   | AMING MACHINE HAVIN  | NG DYNAMIC BONUS FEATO   |  | CATION FEE  | TOTAL FEE(S) DUE   | DATE DUE   |
|                  | nonprovisional  | <u> </u>   |  | l  |   |  |  |
|                  | nonprovisional  | NO   | \$1400   |  | \$300   | \$1700   | 08/02/2005   |
|                  | EXAMINER  |  | ART UNIT   | CLASS                                      | SUBCLASS  |  |  |

| 127.7.27.7.1.12  |  | 1550211         |  | 1 CODE CATION TEE                 | TOTAL FEE(S) DUE           | I DATE DUE      |  |  |  |  |  |
|--|--|-----------------|--|-----------------------------------|----------------------------|-----------------|--|--|--|--|--|
| nonprovisional   | nonprovisional NO  |                 | 1  | \$300                             | \$1700                     | 08/02/2005      |  |  |  |  |  |
| EXAM   | EXAMINER   |                 | ıT   | CLASS-SUBCLASS                    | ]                          |                 |  |  |  |  |  |
| SAGER, MARK ALAN   |  | 3714            |  | 463-020000                        | •                          |                 |  |  |  |  |  |
| 1. Change of correspondenc<br>CFR 1.363).  | e address or indication of "F                                  | ee Address" (37 | 2. For printing on the patent front page, list   |                                   |                            |                 |  |  |  |  |  |
| Change of correspond   | dence address (or Change of 22) attached.                      | Correspondence  | (1) the names of up to 3 registered patent attorneys Howard & Howard or agents OR, alternatively,  |                                   |                            |                 |  |  |  |  |  |
| "Fee Address" indicat  | tion (or "Fee Address" Indica<br>or more recent) attached. Use | ation form      | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |                                   |                            |                 |  |  |  |  |  |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  |  |                 |  |                                   |                            |                 |  |  |  |  |  |
| PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  |  |                 |  |                                   |                            |                 |  |  |  |  |  |
| (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)  |  |                 |  |                                   |                            |                 |  |  |  |  |  |
| Konami Gaming, Inc. Las Vegas, Nevada  |  |                 |  |                                   |                            |                 |  |  |  |  |  |
| Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 💆 Corporation or other private group entity 🚨 Government  |  |                 |  |                                   |                            |                 |  |  |  |  |  |
| 4a. The following fee(s) are   | enclosed:  |                 | b. Payment of Fee(s):  |                                   |                            |                 |  |  |  |  |  |
| Issue Fee  |  |                 | A check  | in the amount of the fee(s) is en | closed.                    |                 |  |  |  |  |  |
|  | small entity discount permitte                                 |                 | Payment by credit card. Form PTO-2038 is attached.   |                                   |                            |                 |  |  |  |  |  |
| Advance Order - # of   | Advance Order - # of Copies10                                  |                 |  |                                   |                            |                 |  |  |  |  |  |
|  | (from status indicated above                                   | ,               |  |                                   |                            |                 |  |  |  |  |  |
| a. Applicant claims S  | MALL ENTITY status. See  | 37 CFR 1.27.    | 🖵 b. Appli   | cant is no longer claiming SMA    | LL ENTITY status. See 37 ( | CFR 1.27(g)(2). |  |  |  |  |  |
| The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. |  |                 |  |                                   |                            |                 |  |  |  |  |  |
| Authorized Signature   | Jan W  | / ·             |  | Date 0                            | 7/06/2005                  |                 |  |  |  |  |  |
| Typed or printed name  | James R. Yee   | <u> </u>        | Registration No. 34,460  |                                   |                            |                 |  |  |  |  |  |

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.